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ABSTRACT

This federally mandated report describes Fiscal Year 1993 activities of the National Council on Disability, which provides leadership in the development and evaluation of disability policy. The report states the mission of the Council and names of its members and staff. It provides synopses of research conferences, news conferences, testimony before Congress, and liaison with federal and international agencies. Recommendations from six reports published by the Council in 1993 are provided. The six reports concern the following: (1) implementation of the Americans with Disabilities Act; (2) the unique needs of minorities with disabilities; (3) financing assistive technology; (4) access to health insurance; (5) the impact of elementary and secondary education programs and special education for children with disabilities; and (6) wilderness accessibility. Appendixes to the report provide Council member and staff biographies and a publication list. (JDD)

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NATIONAL COUNCIL ON DISABILITY

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ED 375 562

Annual Report to the President
and the Congress of the United States

Volume 14

Fiscal Year 1993

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Together we've begun to shift disability policy in America away from exclusion, towards inclusion; away from dependence towards independence; away from paternalism, and towards empowerment.

President William J. Clinton
April 16, 1993

**National Council on Disability
Annual Report Volume 14
Fiscal Year 1993**

Publication date: March 31, 1994

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as this document has not been subjected to the A-19 Executive Branch review process.**



NATIONAL COUNCIL ON DISABILITY

An independent federal agency working with the President and the Congress to increase the inclusion, independence, and empowerment of all Americans with disabilities.

Letter of Transmittal

March 31, 1994

**The President
The White House
Washington, DC 20500**

Dear Mr. President:

In accordance with Section 401(a)(9) of the Rehabilitation Act of 1973, as amended, we are pleased to provide you with the National Council on Disability's Fiscal Year 1993 Annual Report.

Fiscal Year 1993 was a very busy and productive year for the National Council. In addition to conducting hearings, forums and conferences on issues of interest to people with disabilities, the Council published six major reports dealing with the implementation of the Americans with Disabilities Act; the unique needs of minorities with disabilities; financing assistive technology; access to health insurance; the impact of elementary and secondary education programs and special education for children with disabilities; and, wilderness accessibility. For easier reference, we have included the recommendations from these six reports into this document.

Under your leadership, the Council will continue to focus on important current and emerging public policy issues affecting people with disabilities and their families. Also in the coming months, the Council will be providing you with a copy of a new Congressionally mandated annual report entitled *National Disability Policy: A Progress Report*. This report will discuss the status of disability in this country and provide policy advice regarding health, education, housing, employment, transportation, recreation, and training issues as they affect Americans with disabilities.

We truly appreciate being in a position to serve you, the Congress, and people with disabilities. We look forward to working with you in the years ahead.

Sincerely,

**John A. Gannon
Acting Chairperson**

(The same letter of transmittal was sent to the President Pro Tempore of the Senate and the Speaker of the House.)

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Mission of the National Council on Disability

Overview and Purpose

The National Council on Disability is an independent federal agency led by 15 members appointed by the President of the United States and confirmed by the U.S. Senate.

The overall purpose of the National Council is to promote policies, programs, practices, and procedures that guarantee equal opportunity for all individuals with disabilities, regardless of the nature or severity of the disability; and to empower individuals with disabilities to achieve economic self sufficiency, independent living, and inclusion and integration into all aspects of society.

Specific Duties

The current statutory mandate of the National Council includes the following:

- ◆ Reviewing and evaluating, on a continuing basis, policies, programs, practices, and procedures concerning individuals with disabilities conducted or assisted by Federal departments and agencies, including programs established or assisted under the Rehabilitation Act of 1973, as amended, or under the Developmental Disabilities Assistance and Bill of Rights Act; and all statutes and regulations pertaining to Federal programs which assist such individuals with disabilities in order to assess the effectiveness of such policies, programs, practices, procedures, statutes, and regulations in meeting the needs of individuals with disabilities;
- ◆ Reviewing and evaluating, on a continuing basis, new and emerging disability policy issues affecting individuals with disabilities at the Federal, State, and local levels, and in the private sector, including the need for and coordination of adult services, access to personal assistance services, school reform efforts and the impact of such efforts on individuals with disabilities, access for health care, and policies that operate as disincentives for the individuals to seek and retain employment.
- ◆ Making recommendations to the President, the Congress, the Secretary of Education, the Director of the National Institute on Disability and Rehabilitation

Research, and other officials of Federal agencies, respecting ways to better promote equal opportunity, economic self-sufficiency, independent living, and inclusion and integration into all aspects of society for Americans with disabilities.

- ◆ Providing the Congress, on a continuing basis, advice, recommendations, legislative proposals, and any additional information which the Council or the Congress deems appropriate;
- ◆ Gathering information about the implementation, effectiveness, and impact of the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.);
- ◆ Advising the President, the Congress, the Commissioner of the Rehabilitation Services Administration, the Assistant Secretary for Special Education and Rehabilitative Services within the Department of Education, and the Director of the National Institute on Disability and Rehabilitation Research on the development of the programs to be carried out under the Rehabilitation Act of 1973, as amended;
- ◆ Providing advice to the Commissioner with respect to the policies of and conduct of the Rehabilitation Services Administration;
- ◆ Making recommendations to the Director of the National Institute on Disability and Rehabilitation Research on ways to improve research, service, administration, and the collection, dissemination, and implementation of research findings affecting persons with disabilities;
- ◆ Providing advice regarding priorities for the activities of the Interagency Disability Coordinating Council and reviewing the recommendations of such Council for legislative and administrative changes to ensure that such recommendations are consistent with the purposes of the Council to promote the full integration, independence, and productivity of individuals with disabilities;
- ◆ Preparing and submitting to the President and the Congress a report entitled *National Disability Policy: A Progress Report* on an annual basis; and

- ◆ Preparing and submitting to the Congress and the President a report containing a summary of the activities and accomplishments of the Council on an annual basis.

Population Served and Current Activities

While many government agencies deal with issues and programs affecting people with disabilities, the National Council is the only federal agency charged with addressing, analyzing, and making recommendations on issues of public policy which affect people with disabilities regardless of age, disability type, perceived employment potential, economic need, specific functional ability, status as a veteran, or other individual circumstance. The National Council recognizes its unique opportunity to facilitate independent living, community integration, and employment opportunities for people with disabilities by assuring an informed and coordinated approach to addressing the concerns of persons with disabilities and eliminating barriers to their active participation in community and family life.

The National Council plays a major role in developing disability policy in America. In fact, it was the Council that originally proposed what eventually became the Americans with Disabilities Act of 1990. Our present list of key issues includes personal assistance services, health care reform, the inclusion of students with disabilities in high quality programs in typical neighborhood schools, equal employment opportunity, community housing, monitoring the implementation of the Americans with Disabilities Act, improving assistive technology, and ensuring that persons with disabilities who are members of minority groups fully participate in society.

Statutory History

The National Council was initially established in 1978 as an advisory board within the Department of Education (Public Law 95-602). The Rehabilitation Act Amendments of 1984 (Public Law 98-221) transformed the National Council into an independent agency.

NATIONAL COUNCIL MEMBERS AND STAFF

MEMBERS

John A. Gannon, Acting Chairperson
A. Kent Waldrep, Jr., Vice Chairperson
Linda W. Allison
Ellis B. Bodron
Larry Brown, Jr.
Mary Ann Mobley Collins
Anthony H. Flack
Robert S. Muller
George H. Oberle, P.E.D.
Sandra S. Parrino
Mary M. Raether
Shirley W. Ryan
Anne C. Seggerman
Michael B. Unhjem
Helen W. Walsh

STAFF

Edward P. Burke, Acting Executive Director
Billie Jean Hill, Program Specialist
Mark S. Quigley, Public Affairs Specialist
Brenda Bratton, Executive Secretary
Stacey S. Brown, Staff Assistant
Janice Mack, Administrative Officer

EDITORS

Edward P. Burke, Acting Executive Director
Mark S. Quigley, Public Affairs Specialist

THE YEAR IN REVIEW: FY 1993

In its effort to provide leadership in the development and evaluation of disability policy, the National Council on Disability undertook a wide variety of activities in Fiscal Year 1993, with an appropriated budget of \$1,541,000.

The National Council's FY 1993 activities centered on the integration of the Americans with Disabilities Act of 1990 (ADA), Public Law 101-336, which was initially proposed by the National Council, into all aspects of federal planning, regulations, and legislation. During the Fiscal Year, the Council published its report *ADA Watch -- Year One: A Report to the President and the Congress on the Progress in Implementing the Americans with Disabilities Act*. The Council also continued to identify the overall needs and concerns of individuals with disabilities by conducting hearings, forums and conferences throughout the country, and by responding to thousands of telephone and written inquiries on the ADA and other issues.

Among the highlights of FY 1993, the Council also published studies on financing assistive technology; ensuring access to health insurance and health-related services; assessing the impact of elementary and secondary education programs and special education for children with disabilities; minorities with disabilities; and wilderness accessibility (as mandated by Section 507 of the ADA). (A list of the National Council's publications may be found in Appendix A.) The Council held hearings on the inclusion of students with disabilities; sponsored an ADA Labor seminar; and conducted a national conference designed to initiate dialogue on *Furthering the Goals of the ADA Through Disability Policy Research in the 1990s*.

In addition, President Clinton nominated Marca Bristo (Chairperson), Chicago, Illinois, and Kate Pew Wolters, Grand Rapids, and announced his intention to nominate three new members to the National Council: Michele Alioto, San Francisco, California; Bonnie O'Day, Boston, Massachusetts; and Hughey Walker, Georgetown, South Carolina.

Two current members being considered for reappointment are John A. Gannon, Washington, D.C. and Cleveland, Ohio; and Larry Brown, Jr., Potomac, Maryland.

HEARINGS, FORUMS AND CONFERENCES

During FY 1993, the National Council conducted several hearings, forums and conferences to elicit public response on a number of issues affecting people with disabilities and to inform the public of its activities. The following is a summary of those activities:

Research Conference

December 7-9, 1992; Washington, D.C.

Synopsis

The National Council conducted a national conference designed to initiate dialogue on *Furthering the Goals of the ADA Through Disability Policy Research in the 1990s*, to identify the resources and infrastructures available to enhance the process, and to articulate steps that can be taken to monitor the implementation of the Act. The conference was cosponsored by the National Council on Disability and the National Institute on Disability and Rehabilitation Research.

News Conference

December 9, 1992, Washington, D.C.

Synopsis

The National Council conducted a news conference highlighting the release of its report entitled *Wilderness Accessibility for People with Disabilities: A Report to the President and the Congress of the United States on Section 507(a) of the Americans with Disabilities Act*.

Congressional Breakfast and News Conference

March 4, 1993; Washington, D.C.

Synopsis

A Congressional breakfast and news conference was held by the National Council on Disability to highlight the release of three reports entitled *Serving the Nation's Students with Disabilities: Progress and Prospects*; *Sharing the Risk and Ensuring Independence: A Disability Perspective on Access to Health Insurance and Health-Related Services*; and *Study on the Financing Assistive Technology Devices and Services for Individuals with Disabilities*.

News Conference

April 5, 1993; Austin, TX

Synopsis

A news conference was conducted by the National Council at the Texas Rehabilitation Commission, highlighting the release of its report *ADA Watch -- Year One: A Report to the President and the Congress on Implementing the Americans with Disabilities Act*.

News Conference

April 26, 1993; New York, NY

Synopsis

The National Council conducted a news conference in New York City to highlight the release of its report, *Meeting the Unique Needs of Minorities with Disabilities: A Report to the President and the Congress*.

ADA Labor Seminar

June 23, 1993; Cleveland, OH

Synopsis

A one-day seminar on the Americans with Disabilities Act was held at the MetroHealth Medical Center in Cleveland, Ohio. Entitled *Impact in the*

Workplace, this seminar provided the history and background of the Americans with Disabilities Act, with practical application on accommodating work sites for injured workers, and information on compliance and collective bargaining agreements. The seminar was sponsored by the AFL-CIO, IAM Cares, and MetroHealth Systems, and was approved for continuing education credit by the Ohio Supreme Court Commission on Continuing Legal Education. Funding for the seminar was provided by the National Council.

Inclusion of Students with Disabilities Hearing

August 4-5, 1993; Chicago, Illinois

Synopsis

The National Council conducted a public hearing on the positive aspects of inclusion of students with disabilities in the mainstream of our education system. Entitled *Making Inclusionary Education Work: Overcoming Barriers to Quality*, this public hearing was conducted to assist elected officials and other leaders in education policy and planning roles in their efforts to ensure that students with disabilities are provided every opportunity to receive a high quality education and related services in local neighborhood schools.

RESEARCH STUDIES

The National Council has a long history of conducting research in areas of critical interest to persons with disabilities. To this end, the National Council, in response to its Congressional mandate, continued to act as liaison to the National Institute on Disability and Rehabilitation Research (NIDRR), as discussed further below. For example, in FY 1993, the National Council developed a cooperative agreement with NIDRR to conduct a national disability policy research conference.

In addition, the National Council itself commissioned six studies that impacted on the successful implementation of the ADA, the ability of people with disabilities to live productively and independently in their communities, and the quality of life for people with disabilities. The studies addressed issues concerning education, health insurance, financing assistive technology, ADA implementation, minorities

with disabilities, and wilderness accessibility. Reports on the findings and recommendations of the National Council based on these studies were released during Fiscal Year 1993. The recommendations from these studies can be found in the **RECOMMENDATIONS** section of this report. The following is a brief description of these studies:

Education

The National Council's education study, *Serving the Nation's Students with Disabilities: Progress and Prospects*, examines the outcomes of elementary and secondary education programs and special education for children and youth with disabilities. The study examines outcomes such as academic achievement, work preparation and quality of life. This is the second education study conducted by the National Council. It tracks progress in improving our education system for students with disabilities since the first study, entitled *The Education of Students with Disabilities: Where Do We Stand?*, was issued in September 1989.

Health Insurance

The health insurance study, *Sharing the Risk and Ensuring Independence: A Disability Perspective on Health Insurance* provides valuable information to policymakers concerned with issues of health care reform. The purpose of this study was to identify barriers to and supports for health insurance and health-related services in the public and private sectors. A report with Council recommendations addressing the problems faced by individuals with disabilities in obtaining adequate coverage was published during FY 1993.

Technology

The Council's technology study, *Financing Assistive Technology Devices and Services for Individuals with Disabilities*, was mandated by Congress in the Technology-Related Assistance for Individuals with Disabilities Act of 1988. This study examined federal laws, regulations, procedures and practices that facilitate or impede the ability of States to develop consumer-responsive statewide systems

of technology-related assistance for individuals with disabilities. It considers financing mechanisms in the public and private sectors and their impact on the lives of people with disabilities. A report containing a set of detailed recommendations that will assist policymakers in creating increased opportunities for people with disabilities to obtain appropriate assistive technologies was published in FY 1993.

ADA Watch

The National Council's ADA Watch project monitored and evaluated the first year of implementation of the ADA. This project included the following activities: evaluating the progress of federal agencies in issuing regulations, providing technical assistance, and establishing and utilizing enforcement mechanisms; examining efforts by covered entities in voluntarily complying with the ADA; assessing efforts of the non-profit sector in furthering the goals of the ADA; tracking ADA litigation and complaints; and identifying exemplary programs that enhance access, improve employment opportunities, and otherwise guarantee the civil rights of people with disabilities.

Minorities with Disabilities

The National Council released its report, *Meeting the Unique Needs of Minorities with Disabilities: A Report to the President and the Congress*, which addressed the unmet needs of minorities with disabilities. The report reflects the results of a recent National Council conference on minorities with disabilities co-sponsored by Jackson State University in Mississippi, and a public hearing identifying the needs of minorities with respect to the Americans with Disabilities Act, held in San Francisco, California.

Wilderness Accessibility

As mandated by Section 507 of the Americans with Disabilities Act, the National Council released a study of the accessibility of wilderness areas. *Wilderness Accessibility for People with Disabilities: A Report to the President and the*

Congress of the United States on Section 507(a) of the Americans with Disabilities Act analyzed the effects that wilderness designations and wilderness land management practices have on the ability of individuals with disabilities to use and enjoy the National Wilderness Preservation System (NWPS). It focused particularly on the National Park Service, the U.S. Forest Service, the Bureau of Land Management, and the Fish and Wildlife Service.

TESTIMONY BEFORE CONGRESS

During FY 1993, the National Council on Disability provided formal testimony before the Congress on two occasions. These were as follows:

March 18, 1993, before the U.S. House of Representatives

The U.S. House of Representatives Committee on Appropriations, Subcommittee on Labor and Human Services, and Education, received testimony from John A. Gannon, Acting Chairperson, regarding its Fiscal Year 1994 Budget Request.

June 29, 1993, before the U.S. Senate

John A. Gannon, Acting Chairperson, and Edward P. Burke, Chief of Government Liaison, testified before the U.S. Senate Committee on Labor and Human Resources, regarding the reauthorization of the Technology-Related Assistance Act of 1988.

LIAISON WITH THE NATIONAL INSTITUTE ON DISABILITY AND REHABILITATION RESEARCH

The National Council held regular meetings with the Director and the staff of NIDRR to discuss the continued development of the NIDRR five-year plan and to coordinate the efforts of the Council and NIDRR in other research areas of mutual concern. In addition, the National Council made recommendations to NIDRR on issues of public policy that affect the wide range of people with disabilities, including individuals of different ages, conditions, perceived

employment potentials, economic needs, specific functional abilities, or other individual circumstances.

LIAISON WITH THE PRESIDENT'S COMMITTEE ON EMPLOYMENT OF PEOPLE WITH DISABILITIES

In accordance with its authorizing statute, the National Council continued to provide guidance to the President's Committee on Employment of People with Disabilities. During the fiscal year, the National Council and the President's Committee worked cooperatively to identify key employment issues that deserve the attention and resources of the President's Committee. Members of the National Council and the President's Committee attend each others' quarterly/annual meetings.

INFORMATION DISSEMINATION

Throughout the fiscal year, the National Council received thousands of telephone calls and letters from concerned individuals and organizations about disability issues. The Council also continued to increase its communication of important information to persons with disabilities and their families, the Administration, the Congress, and the public through its *FOCUS* newsletter, special reports, annual reports, and ongoing interaction with the news media.

QUARTERLY MEETINGS OF THE NATIONAL COUNCIL

As required by Section 400(c) of the Rehabilitation Act of 1973, as amended, the full Council met on four occasions during the fiscal year. The following are the dates and locations of these meetings:

November 4-6, 1992; Arlington, Virginia
January 25-26, 1993; Tucson, Arizona
April 26-28, 1993; New York, New York
August 2-3, 1993; Chicago, Illinois

UNITED NATIONS

At the request of the Administration, the National Council on Disability served as part of the United States delegation to the Commission for Social Development of the United Nations in Vienna. The Council's report, *Progress in Advancing the Status of People with Disabilities Around the World: The Work of the United States Delegation to the Thirty-Third Session of the Commission for Social Development of the United Nations*, details the work conducted at that meeting by John A. Gannon, Acting Chairperson, Edward P. Burke, Acting Executive Director, and other members of the delegation.

The most significant outcome of this work was that the Commission for Social Development voted to approve the first-ever United States sponsored resolution on disability policy. This resolution, entitled *The Positive and Full Inclusion of Persons with Disabilities in All Aspects of Society and the Leadership Role of the United States Therein*, embodies the spirit of the landmark Americans with Disabilities Act and sets a new and higher standard for the status of people with disabilities in societies all around the world.

RECOMMENDATIONS

During Fiscal Year 1993, the National Council published six major reports to the President and the Congress. The recommendations from those reports are as follows:

Sharing the Risk and Ensuring Independence: A Disability Perspective on Access to Health and Health-Related Services (3/93)

Recommendation 1:

Congress and the Administration should ensure that any health care reform plan adequately meets the needs of persons with disabilities, including full portability of coverage and a broad scope of benefits.

Recommendation 2:

Congress should enact legislation mandating community rating for all health insurance plans as a means of spreading the health insurance risk and reducing the cost of coverage for persons with disabilities.

Recommendation 3:

Congress should enact legislation mandating the elimination of preexisting-condition exclusions and waiting periods to increase the availability of private insurance coverage for persons with disabilities.

Recommendation 4:

Congress should halt discriminatory insurance practices by enacting legislation prohibiting medical underwriting that excludes individuals from groups on the basis of their health status.

Recommendation 5:

Congress should enact legislation mandating that insurance be guaranteed for small groups and individuals. Such a law would prohibit insurers from dropping persons from coverage because of deteriorating health and would promote portability of coverage.

Recommendation 6:

Congress should enact legislation that regulates annual insurance premium increases in order to stabilize health insurance costs.

Recommendation 7:

Congress should amend the Internal Revenue Code to permit greater deductions for health care, personal assistance, and assistive technology expense for persons with disabilities.

Recommendation 8:

Congress should amend the Social Security Act to eliminate the 24-month waiting period for Medicare benefits to ensure continuity of coverage for qualified persons with disabilities.

Recommendation 9:

Congress should mandate a Medicaid buy-in for persons with disabilities to reduce employment disincentives.

Recommendation 10:

Congress should expand Section 1619 work incentive provisions of the Social Security Act to Medicare. This would reduce employment disincentives for Medicare beneficiaries.

Recommendation 11:

Congress should revise the Medicare benefit structure to better meet the needs of beneficiaries with disabilities.

Recommendation 12:

Congress should mandate the expansion of home and community-based service options to reduce the unnecessary institutionalization of persons with disabilities in public insurance programs.

Recommendation 13:

Congress should expand access to personal assistance services and assistive devices either by earmarking an annual appropriation to the Social Services Block Grant (Title XX) or by mandating Medicaid coverage. In addition, states should be permitted to introduce a buy-in component to programs that provide these services so all persons with disabilities may have access to them regardless of ability to pay.

Recommendation 14:

Congress should establish an Office of the Assistant Secretary for Disability at the Department of Health and Human Services to ensure a disability perspective in all future health care policy.

Recommendation 15:

Congress should require state and local agencies that receive federal funds to support services for persons with disabilities to develop coordinated service delivery plans integrating health and social services.

Recommendation 16:

The Secretary of the Department of Health and Human Services should encourage schools for health professionals to develop curricula that educate providers about the health concerns of persons with disabilities.

Recommendation 17:

The Agency for Health Care Policy and Research should encourage those who study treatment effectiveness to consider outcomes that are relevant to persons with disabilities.

Recommendation 18:

Congress should direct the Social Security Administration to assess its outreach program for encouraging use of Supplemental Security Income (SSI) work incentives, and to determine why participation is low under Section 1619 and other work incentive provisions.

Recommendation 19:

Congress should authorize and fund a consensus conference on developing an acceptable definition of disability that could be used as a basis for national surveys.

Recommendation 20:

Congress should require the Bureau of the Census to conduct a survey to determine the extent to which persons with disabilities and others lack adequate health insurance.

Recommendation 21:

Congress should direct the Department of Labor, the Social Security Administration, and the Health Care Financing Administration (HCFA), in consultation with the National Council on Disability, to design a study assessing the scope and consequences of underemployment among the population with disabilities that often results from work disincentives in public insurance programs.

Recommendation 22:

Congress should authorize and fund the National Council on Disability to commission a study examining the health consequences and secondary disabilities that persons with disabilities may suffer because of lack of timely, appropriate treatment.

***Study on the Financing of Assistive Technology Devices and
Services for Individuals with Disabilities (3/93)***

Recommendation 1:

Mandate by statute the development of a national classification system for assistive technology devices and services and establish and collect uniform data sets across public programs.

Recommendation 2:

Authorize the National Institute on Disability and Rehabilitation Research to publish by the end of each calendar year an Annual Report to the Congress on the status of funding of assistive technology devices and services for Americans with disabilities.

Recommendation 3:

Establish the statutory authority for a federal Assistive Technology Interagency Coordination council to meet quarterly and be responsible for improved coordination of services and funding for assistive technology for Americans with disabilities.

Recommendation 4:

Amend the state plan requirements in multiple statutes to require assurances and a planning process with timeliness for expanding funding access to assistive technology for children and adults with disabilities.

Recommendation 5:

Amend the individual program planning requirements in multiple statutes to provide notice to individuals with disabilities and their families of the right to assistive technology devices and services in response to individualized needs in a timely manner.

Recommendation 6:

Add the complete definition of assistive technology devices and services adopted in the Tech Act to the following programs of the Social Security Act: Title II, Social Security Disability Insurance; Title V, Maternal and Child Health Block Grant; Title XVI, Supplemental Security Income; Title XVIII, Medicare; and Title XIX, Medicaid.

Recommendation 7:

Reauthorize the Tech Act for an additional three years and strengthen opportunities for interagency coordination, systems change, and consumer choice and control.

Recommendation 8:

Establish Assistive Technology Demonstration and Recycling Centers nationwide in the capital city of each state and in the top 50 Standard Metropolitan Statistical Areas to be operated by existing Centers For Independent Living or other community-based organizations that are consumer controlled and directed to enhanced consumer choice and control of assistive technology services and funding.

Recommendation 9:

Authorize the use of the Social Security Trust Fund as a financing source for purchasing assistive technology that enhances the capacity to work through an Individualized Employment Account (IEA).

Recommendation 10:

Establish a Technology Watch program patterned after NCD's current ADA Watch activities to monitor compliance with enforcement of federal rights to or requirements for expanding technology access for children and adults with disabilities.

Recommendation 11:

Authorize by statute the establishment of a National Center on Assistive Technology Legal Advocacy to specialize in funding issues.

Recommendation 12:

Develop statutory authority that requires private health insurers to apply medical necessity standards to durable medical equipment, prostheses, and orthotics that enhance function in activities related to health, safety, and Activities of Daily Living (ADLs).

Recommendation 13:

Create a comprehensive set of fiscal incentives encouraging private industry to invest in the production, marketing, and distribution of assistive technology to benefit Americans with disabilities.

Recommendation 14:

Amend Section 162 of the Internal Revenue Code to allow taxpayers with disabilities who do not itemize the option of claiming assistive technology expenses as above-the-line adjustments to income. Request the Department of the Treasury to develop a cohesive set of tax policies on assistive technology for persons with disabilities that calcifies national values and goals as articulated in the ADA and the Tech Act.

Recommendation 15:

Authorize by statute universal product design guidelines for application in the manufacture of electronic equipment and other products to enhance accessibility by individuals with disabilities.

Recommendation 16:

Amend the Communications Act of 1934 to establish and implement a national policy of available, affordable, and accessible telecommunication services to Americans with disabilities.

***Serving the Nation's Students with Disabilities:
Progress and Prospects (3/93)***

Recommendation 1:

Update and revise A Guide to Improving the National Education Data System to include "students who receive special education services" or "individuals with disabilities," including the following areas:

Student and Community Background Statistics: Beginning of the school year membership counts, private school student background statistics, and desegregated data from National Center for Education Statistics (NCES) sample and universe surveys;

Education Resource Statistics: District-level data from the Common Core of Data Survey, program and function-based accounting data, data collection regarding status of school buildings, and measures that indicate total dollar investment in personnel; **School Process Statistics:** National and state-by-state data on personnel supply-and-demand-based broad indicators of teacher preparation,

national-and-state-level data on student opportunities to learn specific instructional topics, and national-and-state-level data on drug and alcohol use and violence in the schools, as well as policies and programs undertaken to prevent such occurrences; and Student Outcome Statistics: State-by-state comparisons of students' knowledge in core content areas (reading, writing, etc.); differences in performance among important subgroups of students performance over time for all grades and subjects at national and state levels; research, development, and experimentation with new types of assessment techniques to provide more sophisticated and broader measures of student performance; state-by-state and locale-by-locale student achievement measures scaled to allow international comparisons; Information regarding links between student achievements and student courses of study undertaken; possible linkage of specific features of NAEP, NELS, and other relevant survey and research instruments; national and state periodic reports on school dropouts and completers; intergovernmental reports of postsecondary school enrollment patterns and (un)employment patterns; and specific measures of student satisfaction with schools and of student future aspirations.

Recommendation 2:

Establish an independent program evaluation system whereby selected school districts send annual special education data (e.g. child counts) and supporting documentation to the Office of the Inspector General and/or to the General Accounting Office for "independent" reviews and cross-checks with the special education data that are reported annually to Congress under the Individuals with Disabilities Education Act.

Recommendation 3:

Incorporate and publish a statistically representative sample of students proficiency scores from reform-based assessments (e.g., NAEP). These assessments must reflect every student segment, including students with disabilities or students who receive special education services.

Recommendation 4:

Develop a data system that:

Supports the disaggregation of data by gender, race, ethnicity, socioeconomic status, disability and non-disability status, and age group across levels of education;

Supports performance feedback loops or chains that are incorporated into all education accountability efforts for minority and majority student groups;

Generates evaluative information and materials that are not used as weapons against educators and do not produce defensive reactions;

Incorporates short-and-long-range planning and reform activities across and within federal and state agencies and programs; and

Stimulates program improvements and promotes research on behalf of all of America's students.

Recommendation 5:

Ensure that all federal and state education reform proposals and policies address the needs of all students, including all students with disabilities, by making this a basic requirement or criterion in federal reform efforts.

Recommendation 6:

Require that all national studies and reports on education should include students with disabilities. For example, federal policymakers should ensure that the performance proficiency scores of students who receive special education services are included in the following:

The National Assessment of Educational Progress (NAEP), Trial Math, Science, and other evaluations;

The National Education Longitudinal Study follow-along research project;

The National Longitudinal Transition Study follow-along research project; and

All other relevant assessments that obtained, but did not highlight, performance or proficiency scores achieved by students who receive special education and related services.

Recommendation 7:

Require that indicators and measures that highlight the achievement of all of the nation's students, including those who receive special education services, be developed and applied. For example, measurement strategies are needed in the following areas:

School Readiness: Include measures of individualized family service program (IFSP) goals and objectives that are accomplished by children/families served by Part H of IDEA;

High School Completion: Include measures of basis of exit for students who receive special education services through IDEA, which incorporates new data that identify basis of exit from different educational settings;

Student Achievement and Citizenship: Include measures of students with disabilities or students who receive special education services who have been permitted to take the Civics Trends Assessment portion of the NAEP tests;

Science and Mathematics: Include desegregated scores and measures of students with disabilities or students who receive special education services who have been permitted to take NAEP State Math (or Science) Trial Assessments and, for comparative purposes, students with disabilities or students who receive special education services who have been permitted to take the 1991 International Assessment of Education;

Adult Literacy and Lifelong Learning: Include all interagency (e.g., Department of Labor) studies and/or assessment measures of adults with disabilities who have been permitted to take various agencies' tests. Postsecondary (college) attendance and college completion rates for students with disabilities are available and relevant; and

Safe, Disciplined, Drug-Free Schools: Include student responses and measures generated by the Drug Use and School Safety Surveys that have been administered to students with disabilities or students who receive special education services. Other critical measures should focus on minimal instructional time lost (e.g., student absenteeism, suspensions, expulsions), which is highlighted, in part, in the Office of Civil Rights biannual surveys.

Recommendation 8:

Rigorously and strictly enforce the requirements of the Individuals with Disabilities Education Act.

Parents**Recommendation 1:**

Parents should assume and excuse full responsibility for maintaining the integrity of their children's special education entitlement. For example, parents should actively participate in the development of their children's individualized education programs, individualized family service plans, or individualized transition plans.

Recommendation 2:

Parents should be partners with schools so that they can maintain an active role in educational decision-making activities related to their children's progress. For example, parents should work collaboratively with schools to place their children in the least restrictive and most appropriate settings.

Recommendation 3:

Parents of children with disabilities should participate as advocates in local state, and federal school reform initiatives.

Students**Recommendation 1:**

Students with disabilities, whenever appropriate, should become active participants in the design and implementation of their educational programs.

Recommendation 2:

Students with disabilities, whenever appropriate, should participate in evaluations of their educational programs.

Recommendation 3:

Students with disabilities, whenever appropriate, should participate in planning for their transition from school to adulthood to ensure a satisfactory quality of life.

School Officials and Educators

Recommendation 1:

State/local education agency personnel must ensure that they establish and maintain effective partnerships with parents. They should facilitate ongoing, two-way communication, including full and clear information about student and parent rights under federal and state special education laws.

Recommendation 2:

Systemwide administrators must provide continuous, state-of-the-art inservice training and support for regular education instructional staff to guarantee successful and full inclusion of students with disabilities into regular classroom settings.

Recommendation 3:

Higher education personnel must develop preservice teacher training programs based on proven teacher preparation practices and in collaboration with state/local education agencies and school districts that meet the unique and diverse needs of student populations.

Recommendation 4:

State and local school districts must ensure that their personnel become familiar with available and appropriate community resources that facilitate successful transitions of students with disabilities to adult life.

Agents of School Reform

Recommendation 1:

Agents for school reform should provide long-and short-term reform proposals that articulate how students with disabilities will be specifically included in federal, state, and local initiatives.

Recommendation 2:

Agents for school reform should support the design of reform proposals that are based on detailed implementation strategies and realistic assumptions regarding efficacy of reform.

Recommendation 3:

Agents for school reform should ensure that students with disabilities and their parents, educational practitioners, and school-based supervisors are empowered to establish and approve all school reform initiatives.

Recommendation 4:

Agents for school reform should encourage private foundations to develop and/or continue their cooperative partnerships with public agencies to focus on reform initiatives involving students with disabilities and other parents.

Researchers**Recommendation 1:**

Researchers should ensure proportional representation of students with disabilities and other traditionally underrepresented student populations in education agencies; these projects must be designed in such a way that the activities respect the dignity, self-worth, and unique accommodations required by the students.

Recommendation 2:

Researchers should develop integrated, reliable management information systems that encourage and allow an open exchange of data across and within levels of government when planning and implementing programs that accommodate students with disabilities and other students who are traditionally neglected and underrepresented.

Recommendation 3:

Researchers should conduct a nationally representative survey that includes students, parents, advocates, education staff, school system administrators, and policymakers and that can be used by systems of government to judge the effectiveness of public education programs for students with disabilities and other students who receive special education services.

***ADA Watch Year One: A Report to the President and Congress on Progress in
Implementing the Americans with Disabilities Act (4/93)***

Recommendation 1:

To sustain the substantial progress achieved in implementing the ADA during its early stages, no amendments to the law should be made at this time.

Recommendation 2:

The federal government should plan, coordinate, and fund a media campaign to disseminate accurate information about the ADA through public service announcements on radio and television.

Recommendation 3:

New materials and dissemination strategies should be developed that are targeted to, and sensitive to the needs of, African Americans, Native Americans, Hispanic and Latino populations, Asian Americans, Pacific Islanders, and other minority populations.

Recommendation 4:

Systematic outreach and technical assistance efforts should be initiated that focus on small business and communities outside major metropolitan areas.

Recommendation 5:

The dissemination of ADA information and technical assistance materials should be increasingly decentralized and moved out to the federal sector.

Recommendation 6:

Federal technical assistance projects should be established in Alaska, Hawaii, and the Trust Territories.

Recommendation 7:

The next generation of technical assistance materials should be more industry-and profession-specific.

Recommendation 8:

More technical assistance should be provided to state and local government entities.

Recommendation 9:

The federal government should formally endorse technical assistance materials to increase public confidence in their validity as standards for ADA compliance.

Recommendation 10:

The federal government should cultivate and coordinate ADA leadership in the private sector and the disability community and thereby become more the catalyst than the provider of technical assistance.

Recommendation 11:

The Interagency Disability Coordinating Council should identify and address gaps in coverage, conflicting definitions of terms, and problems of overlapping jurisdiction of federal disability nondiscrimination laws.

Recommendation 12:

The Department of Justice, the Equal Employment Opportunity Commission, the Department of Transportation, the Federal Communications Commission, and the Access Board should prepare and disseminate regular technical guidance memoranda regarding ADA policy decisions.

Recommendation 13:

Congress and the Administration should consider legislation to address the needs of people with "emerging disabilities," such as those with head injuries resulting from violence or other trauma and those with environmental illness who are severely adversely affected by secondary smoke other pollutants in public places.

Recommendation 14:

A comprehensive research agenda should be developed to measure the nation's progress in meeting the ADA's four goals of equality of opportunity, full participation, independent living, and economic self-sufficiency.

Recommendation 15:

Congress should authorize and fund a large-scale longitudinal study to determine how the needs of people with disabilities are being met over time as the ADA is implemented.

Recommendation 16:

Funding for federal government ADA information dissemination, technical assistance activities, and research should be adequate to ensure the successful ongoing implementation of the law.

Meeting the Unique Needs of Minorities with Disabilities: A Report to the President and the Congress (4/93)

Policymakers

The following are general recommendations that were developed during the conference. Additional specific recommendations relating to the various topics addressed by the conference can be found at the end of each section of this report.

Recommendation 1:

Federal, state, and local agencies should coordinate government policies and programs to meet the needs of minority persons with disabilities, using the competencies of professionals from many different relevant disciplines.

Recommendation 2:

Policies should be established by all federal, state, and local agencies that administer existing government programs to ensure the inclusion of minorities with disabilities in their programs.

Recommendation 3:

Congress should authorize targeted research on minorities with disabilities, and federal disability research agencies such as the National Institute on Disability and Rehabilitation Research (NIDRR) and the National Center for Medical Rehabilitation Research (NCMRR) should plan and fund such research.

Recommendation 4:

Federal disability research agencies such as NIDRR and NCMRR should develop policies that include minorities with disabilities in all disability and rehabilitation-related research.

Recommendation 5:

Service delivery systems, including the state/federal vocational rehabilitation program, should train staff sufficiently to work with multicultural populations.

Recommendation 6:

All federal, state, and local disability programs should develop outreach efforts to ensure the full participation of minority persons with disabilities.

Recommendation 7:

The Department of Health and Human Services (DHHS) should develop a specific initiative to address issues concerning the prevention of disability for minority persons, including the effects of racism, violence, substance abuse, and poor general health.

Recommendation 8:

Federal disability research agencies such as NIDRR and NCMRR should develop a data set sufficient to assess the incidence and prevalence of disabilities and the impact of intervention among all minority populations, regardless of the size of the population.

Recommendation 9:

The Department of Education should develop policies and programs to improve the outcomes of education systems for minority persons with disabilities.

Recommendation 10:

The Department of Labor should develop policies and programs to ensure that minority persons with disabilities will be able to participate as full members in the workforce of the future.

Recommendation 11:

All federal, state, and local agencies responsible for implementing the ADA, including the Department of Justice, the Equal Employment Opportunity Commission, the Department of Transportation, the Federal Communications Commission, the Access Board, and NIDRR, should target greater resources to minority populations with disabilities and the communities in which they live.

Recommendation 12:

Federal, state, and local government should foster the development of grassroots networks connected to more formal regional and national networks for the dissemination

of new information and technology and should establish a funded pool of resources to help minority persons with disabilities.

National Council

The following recommendations specifically target actions for the National Council on Disability, the primary sponsor of the conference, to consider:

Recommendation 1:

Establish a National Council policy that all programs of the Council will include the perspectives of minority populations.

Recommendation 2:

Develop and implement a national task force on minority populations with disabilities to assist in the review of ongoing and prospective Council programs and activities.

Recommendation 3:

Collaborate with all federal agencies that address disability issues to ensure that policies and activities affecting minority populations with disabilities meet their needs.

Recommendation 4:

Maintain liaison with national minority organizations (e.g., National Urban League, NAACP) for advice, as well as outreach toward minority populations with disabilities.

Recommendation 5:

Initiate national and regional meetings to increase awareness of disability issues, particularly issues concerning the ADA, by minority organizations and their constituencies.

Recommendation 6:

Continue to hold forums addressing disability issues that affect minority populations in settings that are fully accessible to minority persons with disabilities.

Recommendation 7:

Establish relationships with other federal agencies that affect minority populations with disabilities, such as the Bureau of the Census and the National Institutes of Health, to

ensure adequate and appropriate data to assess the need for, and impact of, service delivery programs.

Recommendation 8:

Monitor progress within the federal government to ensure the participation of minority persons with disabilities in all aspects of federal policy and programming.

Recommendation 9:

Increase outreach to minority populations with disabilities using different languages and alternative approaches to ensure effective communication.

From Witnesses

Recommendation 1:

To educate students with disabilities, especially those from minority backgrounds, we must look for a new model that involves a collaborative approach and includes all levels from preschool to higher education.

Recommendation 2:

The education system must affect students with disabilities in a positive, not a negative, manner. There must be a focus in preschool programs on preparing students with disabilities from minority backgrounds to be ready to learn.

Recommendation 3:

Schools must be restructured to eliminate negative effects on students. Cooperative learning is a good example of students' learning through sharing of knowledge rather than completion. Diverse student population are integrated so that students learn to work together.

Recommendation 4:

Schools must be able to serve students based upon their needs for individualized services. In other words, each student is unique and schools must be able to develop and modify programs to fit each student's needs. True individual service planning would go a long way toward meeting the needs of all students in the educational system.

Recommendation 5:

Finally, students with disabilities from minority populations must have the opportunity to achieve their potential regardless of the level of education. Attention must be given to funding and ways to enhance access to all education, including higher education.

Vocational Rehabilitation**Recommendation 1:**

Federal policies should enable the provision of vocational rehabilitation services that are culturally appropriate.

Recommendation 2:

Research is needed to determine effective models, services, and resources related to the vocational rehabilitation of persons with disabilities from minority racial/ethnic backgrounds.

Recommendation 3:

Training for vocational rehabilitation personnel must include multicultural emphases and clinical training experiences involving persons with disabilities from minority populations.

Recommendation 4:

Preservice education programs must include specific courses related to multicultural experiences and service delivery.

Recommendation 5:

Incentives should be provided for recruitment and education of under-represented racial/ethnic populations in vocational rehabilitation. The Rehabilitation Services Administration should continue to fund colleges and universities with substantial enrollments of minorities.

Recommendation 6:

There is a need for increased numbers of tribally operated vocational rehabilitation programs to meet the growing needs of Native Americans and Native Alaskans.

Employment

Recommendation 1:

An agenda for the employment of minority persons with disabilities must be multifaceted. There must be a collaborative effort of employment programs, public education, private enterprise, and health and human services programs to enable minorities with disabilities to access employment.

Recommendation 2:

An advisory body should be established with the support of the Department of Labor to address concerns related to apprenticeships, supported employment, and job restructuring to enhance access of minority persons with disabilities to labor unions.

Recommendation 3:

A national network of employers and minority persons with disabilities should be established to enable the sharing of job leads, to reduce feelings of isolation, and to provide a forum for proactively discussing employment issues.

Recommendation 4:

Strategies should be developed to ensure the inclusion of minority children with disabilities in appropriate education all levels from preschool to higher education, as already required under the IDEA legislation.

Recommendation 5:

The Rehabilitation Services Administration should use its existing networks to develop a national outreach program targeting minority populations in order to increase their employment levels.

Empowerment

Recommendation 1:

African Americans and other minorities with disabilities who are knowledgeable of the issues that affect them must be included in implementing solutions.

Recommendation 2:

Organizations such as state protection advocacy systems, state mental health administrators, state developmental disabilities councils, and others must become

information and empowerment centers and "think tanks" for the minorities with disabilities.

Mental Health

Recommendation 1:

In addition to providing traditional interventions such as psychotherapies and medication management, service providers should establish programs for the development of caring communities.

Recommendation 2:

Efforts should be made to stimulate the community's positive response to individuals with mental health needs and to create local initiatives to provide solutions.

Recommendation 3:

Ethnic diversity should be seen as a positive, healthy, and expected characteristic of communities, one to be understood with respect and tolerance.

Recommendation 4:

Significant attitudinal changes and new priorities should be established to find new ways to benefit from old technologies. The lingering notion that persons from minority racial/ethnic backgrounds are inherently inferior to others in our society must be rejected. This attitude has significant negative impact on potential treatment outcomes. Mental health approaches must recognize this problem and create positive alternatives to addressing the needs of persons from minority racial/ethnic backgrounds.

Recommendation 5:

Government programs must be restructured to be more responsive to the needs of minorities with disabilities. Current funding structures may need to be rethought so that new initiatives will have resources. The emerging problems of mental disorders, drug and alcohol abuse, and HIV/AIDS prevalence in minority communities have a direct impact on the larger society. Only through cooperative, collaborative mechanisms will solutions develop.

Physical Health

Recommendation 1:

There is a need for improved collection of information on the incidence and prevalence of disability among minorities;

Recommendation 2:

Existing untapped databases must be accessed and used as a basis for further research;

Recommendation 3:

Additional funds are needed to conduct research on the physical health status of people of minority group origin;

Recommendation 4:

The aggressive recruitment and inclusion of minority researchers and educators in the field of health, disability, and vocational rehabilitation is strongly encouraged; and

Recommendation 5:

Communication must be improved between the minority communities and government agencies that are charged with the provision of health related services, including the Rehabilitation Services Administration.

Prevention

Recommendation 1:

Develop strategies specifically targeted at minority populations to decrease the prevalence of disability caused by injuries and chronic diseases. The goal is to reduce the incidence of disabilities resulting from a variety of factors, including environmental factors that cause or contribute to new disabilities.

Recommendation 2:

Ensure that primary and secondary prevention of disability among minorities receives national attention and becomes a policy priority through increased education. Request that the Centers for Disease Control (CDC) obtain and disseminate knowledge of the variables that lead to disabilities in minority populations and how to prevent them.

Recommendation 3:

Develop a community model of primary and secondary prevention that includes culturally relevant strategies. This will require that minority persons with disabilities most directly affected must be a part of the effort to develop a strategy.

Recommendation 4:

Develop a survey instrument to measure incidence and prevalence of various disabilities in minority populations. This will allow the identification of risk factors, the magnitude of risk, and the degree to which risk can be controlled. Eventually, survey data will permit the development of effective preventive interventions.

Substance Abuse**Recommendation 1:**

Legislation funding for prevention, treatment, and interdiction of illegal drugs and alcohol and/or substance abuse;

Recommendation 2:

Include grassroots and community-based organizations in federal grant initiative to address the problems of alcohol and substance abuse;

Recommendation 3:

Legislate a national health care program and insurance for all Americans;

Recommendation 4:

Require pregnant women who are disabled by addiction to participate in drug treatment programs;

Recommendation 5:

Require all local, state, and federal treatment programs to provide culturally specific treatment providers who speak the native language of the person with a disability;

Recommendation 6:

Support the National Congress of American Indians' recommendation to require that the entire 1% Title I allocation be spent for Section 130 vocational rehabilitation programs; and

Recommendation 7:

Establish research and training centers whose mission is to generate research and training information on health and cultural issues for minority persons with disabilities.

Research Needs

Recommendation 1:

Minority communities and persons with disabilities should be involved in the process of planning research, implementing research, and interpreting findings of research.

Recommendation 2:

The data base on minority persons with disabilities should be improved, by using sampling techniques that allow analysis of smaller populations in meaningful ways.

Recommendation 3:

Data collection efforts on issues relating to minority persons with disabilities should be increased.

Recommendation 4:

Specific research initiatives should focus on particular racial, ethnic, and cultural minority populations.

Recommendation 5:

The federal government should continue establishing Research and Training Centers targeting minority populations.

Recommendation 6:

Federally funded research projects on persons with disabilities, such as the Research and Training Centers, should be required to include under-represented groups in all their research efforts.

Recommendation 7:

Training and education programs in disability and rehabilitation research for persons of minority backgrounds should be developed to enhance the total research capability.

Recommendation 8:

A large longitudinal study should be planned and conducted to explore the effects of rehabilitation on minority populations with disabilities over time.

Wilderness Accessibility for People with Disabilities: A Report to the President and the Congress of the United States on Section 507(a) of the Americans with Disabilities Act (12/92)

Recommendation 1:

All federal agencies that manage the NWPS should adopt policies consistent with those stated in Section 507 (c) of the Americans with Disabilities Act as soon as possible.

Recommendation 2:

Federal agencies should bring existing facilities outside of the NWPS up to code for use by persons with disabilities as soon as possible. This upgrade includes trailheads, parking facilities, restrooms, and telecommunications devices for the deaf (TDDs) in ranger stations.

Recommendation 3:

NWPS managing agencies should develop guidelines for special permits and modifications regarding use by persons with disabilities that are consistent with the Wilderness Act. Agencies should be encouraged to facilitate NWPS use by persons with disabilities when such use is consistent with the Wilderness Act. Agencies are encouraged to work with persons with disabilities, outfitters, and other programs that use the NWPS to develop these guidelines.

Recommendation 4:

NWPS unit managers should receive training to increase general awareness of disability issues and specific awareness of the policies and practices regarding use of the NWPS by persons with disabilities.

Recommendation 5:

Each agency should develop better information about what is available to persons with disabilities who want to use the NWPS. This information should be made readily available to the public.

APPENDIX A

NATIONAL COUNCIL MEMBER AND STAFF BIOGRAPHIES

NATIONAL COUNCIL MEMBERS

John A. Gannon, Acting Chairperson

John A. Gannon of Cleveland, Ohio, and Washington, D.C. A fire fighter for more than 30 years, Mr. Gannon was an active leader of the International Association of Fire Fighters (IAFF) Local 93. Starting as a member of the local IAFF committee, he eventually became President, a position he held for 10 years before being elected to national office.

In September 1988, Mr. Gannon was elected IAFF President Emeritus. He had served as President of the 170,000-member organization since 1980. Under his leadership, the IAFF expanded its role in occupational safety and health. Concerned about the hazards of his profession, he guided and directed a series of programs to promote greater safety and health protection. One program sponsored research on safer garments and equipment for fire fighters. Mr. Gannon also fostered development of the IAFF Burn Foundation, which raises funds for research on the care of people who have experienced severe burns. In 1985, the Metropolitan General Hospital in Cleveland dedicated the John Gannon Burn and Trauma Center in recognition of his support for the hospital.

Mr. Gannon was elected Vice President of the AFL-CIO, with which the IAFF is affiliated. Within the AFL-CIO, he was Vice President of the Public Employee Department. On the Executive Council, he was a member of several committees. He serves on the board of the National Joint Council of Fire Service Organizations and in 1982 served as its Chairman. He is a Member of the Board of the Muscular Dystrophy Association. Mr. Gannon was appointed to the National Council on Disability in December 1988 and has served as Acting Chairperson since February 1993.

Mr. Gannon attended Miami University in Ohio and Glasgow University in Scotland, and studied at Baldwin-Wallace College and Cleveland State University.

Kent Waldrep, Jr., Vice Chairperson

Kent Waldrep has been involved with disability issues on the local, state, and national levels since his spinal cord injury in 1974 while playing football for Texas Christian University. Since 1981, Mr. Waldrep has served on the National Council. Beyond serving as Vice Chairperson, he serves as Chairman of the Research and Prevention Committee. He was instrumental in formulating the National Council initiative on preventing primary and secondary disabilities.

Mr. Waldrep, one of 15 original drafters of the Americans with Disabilities Act, gave the legislation its name. He has lectured nationwide on subjects ranging from national disability policy to medical research targeted at curing paralysis. He founded the American Paralysis Association and the Kent Waldrep National Paralysis Foundation. He has appeared on *Good Morning America*, the *Today Show*, the *NBC Nightly News*, and *CNN*, and has been featured in *People*, *Look*, *USA Today*, and other magazines.

He was selected by the U.S. Jaycees as one of 1985's ten Outstanding Young Men in America and received a special award from the Texas Sports Hall of Fame and a sports/fitness award from the President's Council on Physical Fitness. Kent Waldrep Days have been celebrated in four Texas cities and Birmingham, Alabama. He serves on many boards, including the Texas Rehabilitation Commission. He is past Chairman of the Texas Governor's Committee for Disabled Persons and the Dallas Rehabilitation Institute. He also is Chairman of Turbo-Resins, Inc., a family-owned and -operated aviation repair business. He lives in Plano, Texas, with his wife Lynn and two sons, Trey and Charles Cavanaugh.

Linda Wickett Allison

Linda Allison of Dallas, Texas, is a long-time advocate of people with disabilities. She is a Board Member of the National Paralysis Foundation and a trustee for the International Spinal Research Trust. Mrs. Allison, who grew up in Fort Worth, has three children. Her daughter Marcy was paralyzed from the waist down in a 1979 automobile accident. Marcy graduated from the University of Texas School of Law in 1986 and practices law in Austin. Mrs. Allison's late husband, James N. Allison, Jr., owned the *Midland Reporter Telegram* and other newspapers in Texas and Colorado and was a Deputy Chairperson of the Republican National Committee.

Ellis B. Bodron

Ellis Bodron of Vicksburg, Mississippi, has been a practicing attorney since 1947. He served 36 years as a member of the Mississippi legislature, one term in the House of Representatives and eight terms in the Mississippi Senate. He also chaired the Senate Finance Committee from 1961 until 1983.

Mr. Bodron, who is blind, is associated with several civic organizations, including the Vicksburg Lions Club, Vicksburg Chamber of Commerce, and the University of Mississippi Alumni Association. In addition, he is a Member of the Advisory Board of Directors, Deposit Guaranty National Bank.

Mr. Bodron has also been a member of the Agriculture and Industrial Board, which preceded the Board of Economic Development, and the Committee of Budget and Accounting and the Board of Trustees of the Mississippi Public Employees Retirement System. He graduated with a Bachelor of Arts and a Bachelor of Law Degree from the University of Mississippi. He is married with two children.

Larry Brown, Jr.

Larry Brown of Potomac, Maryland, has been the Xerox Business and Community Relations Manager for the Mid-Atlantic Region, Coastal Operations, Custom Systems Division. From 1991 until 1993, he was Government and Community Relations Manager with Integrated Systems Operations.

Mr. Brown was a Running Back for the Washington Redskins for eight years. During that time, he received many awards, including Most Valuable Player in the National Football League for 1972. He was inducted into the Washington, D.C., Touchdown Hall of Fame in 1991.

After retiring from football in 1977, he worked at E.F. Hutton as a Personal Financial Management Adviser. He has been Special Assistant to the Director, Office of Minority Business Enterprise, Department of Commerce. He is involved with youth, people with disabilities, and senior citizens. Mr. Brown has spoken at schools, colleges, and universities on topics such as motivation, discipline, and camaraderie. He works with many organizations, including the Friends of the National Institute on Deafness and

Other Communication Disorders, Joint Action in Community Service, Inc., and the Vincent T. Lombardi Foundation.

Mary Ann Mobley Collins

A former Miss America who lives in Beverly Hills, California, Mary Ann Mobley Collins has a career in film, television and on Broadway. She has co-hosted National March of Dimes telethons with her husband, Emmy-award-winning actor Gary Collins; she is a member of the National Board of the March of Dimes Foundation and is National Chair of the Mother's March against Birth Defects. She is a Member of SHARE, a Los Angeles-based women's organization that has raised more than \$6 million for the Exceptional Children's Foundation for the Mentally Retarded. She serves on the National Board of the Crohns and Colitis Foundation.

Mrs. Collins helped raise funds for the Willowood Foundation in her native Mississippi, which provides homes for young adults with mental and physical disabilities. She has received many awards and honors, including the 1990 International Humanitarian Award from the Institute for Human Understanding, Woman of Distinction 1990 from the National Foundation for Ileitis and Colitis, and the HELP Humanitarian Award of 1985 from HELP for Handicapped Children. She has filmed documentaries in Cambodia, Ethiopia, Mozambique, Somalia, Kenya, Sudan, and Bolivia on the plight of starving children and people with disabilities.

Anthony H. Flack

Anthony Flack of Norwalk, Connecticut, is president of Anthony H. Flack & Associates. He has been a Member of the Board of Families and Children's Aid of Greater Norwalk and has worked with the Child Guidance Center of Greater Bridgeport, the Youth Shelter in Greenwich, Hall Neighborhood House in Bridgeport, and the Urban League of Greater Bridgeport. Mr. Flack is a Member of the Allocations and Admissions Committee, United Way of Norwalk, and received the Bell Award for outstanding service in the field of mental health at the Bridgeport Chapter, Connecticut Association of Mental Health.

Robert S. Muller

Robert Muller of Grandville, Michigan, began his career with Steelcase, Inc., in 1966 and is now an Administrator in human resources. He is an Adjunct Professor in the Department of Psychology at Aquinas College and in the Department of Education at Calvin College in Grand Rapids. He serves on the Board of Trustees for Hope Network and Foundation in Grand Rapids, which serves 1,700 adults with disabilities. In April 1981, he received an honorary degree in educational psychology from the Free University in Amsterdam, the Netherlands.

Mr. Muller holds a B.S. in business administration from Aquinas College and in 1978 was voted Outstanding Alumnus of the Year. He has lectured at colleges and universities nationally and internationally. He is a Board Member for several national, state, and local organizations.

In May 1987, Mr. Muller and his wife Carol hosted a first-time event at the White House with the Vice President. The Celebration of Disabled Americans at Work was co-sponsored by several major corporations. Mr. Muller now serves as President of the National Roundtable on Corporate Development for Americans with Disabilities. In 1985, he received the Liberty Bell Award from the Grand Rapids Bar Association. In 1988, he was National Co-Chair of the Disabled Americans for President Bush Campaign and in 1992 was an Honorary National Member of the Bush/Quayle Disability Coalition Campaign. In November 1992, Mr. Muller was appointed to the Governor's Commission on Handicapped Concerns for Michigan.

George H. Oberle, P.E.D.

Dr. George Oberle of Miami Shores, Florida, has more than 40 years experience in the field of health, physical education, and recreation. He began his career as a high school teacher and coach, and from 1974-1993 was a Professor and Director of the School of Health, Physical Education and Leisure at Oklahoma State University. In 1993, Dr. Oberle became the Chairman of Sport and Exercise Sciences at Barry University in Miami Shores, Florida. Dr. Oberle is a consultant to many organizations in the area of administration and adaptive physical education. In 1988, he worked with the Kennedy Foundation to organize and direct a new program of Unified Sports for the Special Olympics.

Dr. Oberle chaired the College and University Administrators Council (1980-82); was President of the Association for Research, Administration, Professional Councils and Societies (1984-87); and served as a Board Member of the American Alliance of Health, Physical Education, Recreation and Dance (1985-89). Awards include the 1985 Centennial Award from the American Association of Health, Physical Education, Recreation and Dance (AAHPERD); and Meritorious Service Awards from Illinois, Indiana and Oklahoma.

He was selected for *Men of Achievement* in 1975 and recognized in *Who's Who of the Southwest* in 1977. In 1993, Dr. Oberle received AAHPERD's prestigious Honor Award. Dr. Oberle received his doctorate from Indiana University in administration and adapted physical education. He lectures extensively about wellness promotion, adapted physical activity, sports and recreation for people with disabilities. ✓

Sandra Swift Parrino

As a member and former Chairperson of the National Council, Sandra Swift Parrino has played an active role in key issues affecting the lives of people with disabilities. Nominated by President Reagan in 1982, appointed Chairperson by the President in 1983, and reappointed by President Bush, Sandra Swift Parrino has supported the rights of people with disabilities before Congress, in the media, and before groups nationwide. Under her leadership, the National Council was a driving force to create public policies that affect the nation's people with disabilities.

During her tenure as Chairperson, the National Council worked for the creation and enactment of legislation for people with disabilities; issued policy statements such as *National Policy for Persons With Disabilities*; convened hearings nationwide to solicit comments and recommendations from people with disabilities about how to eliminate discrimination; issued a major report, *Toward Independence*, that outlines key components of a comprehensive civil rights law protecting people with disabilities; initiated the first national survey of attitudes and experiences of Americans with disabilities, in conjunction with Louis Harris and Associates, Inc.; issued *On the Threshold of Independence*, a report outlining specifics of the Americans with Disabilities Act; created and developed the Americans with Disabilities Act; participated with President Bush at the signing of the Americans with Disabilities Act; conducted the first National Conference on the Prevention of Primary and Secondary Disabilities; issued reports on minorities with disabilities and personal assistance services; and planned

reports on health insurance, financing assistive technology, and educating students with disabilities.

Before becoming National Council Chairperson, Sandra Parrino founded and directed the Office for the Disabled, in Ossining and Briarcliff Manor, New York, where she created a regional program for public and private organizations that focused on programs for people with disabilities and compliance with 504. She has more than 25 years' experience on boards, councils, commissions, committees, and task forces at the federal, regional, state, and local levels and as an expert witness, community leader, organizer, and activist.

Mrs. Parrino has represented the U.S. government on disability issues in many countries. She has been invited by the Department of State to represent the United States at the Meetings of Experts in Finland and China, and represented the United States at the United Nations Center for Social Development in Vienna several times. In 1990, 1991, and 1992 she was a Delegate at the Third Committee on Social Development of the United Nations. In 1991, she was invited by the People's Republic of China to assist them in their efforts to help people with disabilities. At the request of the government of Czechoslovakia, she and the National Council were invited to conduct the Eastern European Conference on Disabilities for participants from Czechoslovakia, Poland, and Hungary.

Mrs. Parrino graduated from Briarcliff College with a B.A. in history, and completed courses at Bennett College, GuildHall School of Drama in London, and the Yale School of Languages. In 1992, Mrs. Parrino received an Honorary Doctorate of Humane Letters from St. John's University in New York. Her husband Richard is a rheumatologist. They have three children, two of whom have disabilities. Sandra Parrino was born in New Haven, Connecticut, and lives in Briarcliff Manor, New York.

Mary Matthews Raether

Mary Matthews Raether of McLean, Virginia, is associated with St. John's Community Services, Inc., a nonprofit organization providing instruction, employment training, and independent and group home living skills for people with severe mental disabilities, especially autism. Mrs. Raether has been an Officer and Trustee of St. John's since 1985, has chaired the public relations committee, and participated on the executive, nominating, investment, and development committees.

Mrs. Raether has been active in civic, educational, and religious organizations in the Washington metropolitan area. While community Vice President of the Junior League of Washington, she developed emergency grant procedures and fund-raising information services for small and emerging nonprofit organizations. Mrs. Raether has 10 years' experience as Legislative Assistant to Representatives George Bush and Barber Conable. She specialized in tax, Social Security, Medicare/Medicaid, and trade issues. She considers her efforts in clarifying the tax status of lobbying by nonprofit organizations an outstanding career accomplishment. She received a B.A. from the University of Texas at Austin in 1962. She is married and has two children.

Shirley W. Ryan

Shirley W. Ryan, of Kenilworth, Illinois, is President and Co-founder of the Pathways Center for Children, an out-patient, individualized neurodevelopmental therapy center for children with delayed gross or fine motor activity and/or motor-based eating problems. In a related activity, Mrs. Ryan is President and Co-Founder of Pathways Awareness Foundation, a public health care awareness organization that focuses on issues that include child development problems and early infant assessment procedures of children with special needs.

As part of her outreach commitment to the community, Mrs. Ryan serves as a trustee for the Ronald McDonald's Children's Charities and also is Director of the United Cerebral Palsy Association of Chicago. She also participates as an Executive Committee Member for the Chicago Community Trust, a public foundation that makes awards in the areas of health, social services, education, civic affairs, and arts and humanities.

Her other activities include service as Vice Chairman, Board of Directors, Chicago Council on Foreign Relations, Founder, Northwestern University graduate school invitational course; founding member, Northwestern University Women's Board; and Director, Chicago Foundation on Education.

Mrs. Ryan's mission continues to focus on helping children with movement difficulties and their families. Thanks to her vision and perseverance, hundreds of thousands of Americans have learned what signs in a baby's physical development may signal delayed development and the need for assistance. Mrs. Ryan is married and has three children.

Anne Crellin Seggerman

Anne Crellin Seggerman of Fairfield, Connecticut, is the founder of Fourth World Foundation, Inc., a company engaged in the development of interfaith media.

A member of the Bridgeport Urban Gardens and Youth at Risk/Breakthrough Foundation, Mrs. Seggerman founded and serves as the Chairman of the Board of the Fairfield County Chapter of Huxley Institute for Biosocial Research. She previously was a member of the President's Committee on Mental Retardation.

Mrs. Seggerman is listed in *Who's Who of American Women* and has received numerous honors including an Honorary Doctor of Humane Letters Award from Sacred Heart University. She is a Member of the Association of Knights and Ladies of the Holy Sepulchre, and the American Association of the Order of Malta. She was previously appointed to serve on the Housing of Handicapped Families of the Department of Housing and Urban Development.

Mrs. Seggerman is experienced in providing care, treatment, and rehabilitation to people with schizophrenia and has extensive experience with people with alcoholism and children with learning disabilities. She is married and has six adult children.

Michael B. Unhjem

Michael Unhjem of Fargo, North Dakota, is President of Blue Cross Blue Shield of North Dakota. He is the youngest person ever elected to the North Dakota House of Representatives, a member of the National Conference of Commissioners on Uniform State Laws, and he served in 1988 as President of the National Mental Health Association.

Mr. Unhjem has been involved in local and national organizations, including the Advisory Mental Health Council of the U.S. Department of Health and Human Services; the Governor's Commission on Mental Health Services; the National Alliance for Research on Schizophrenia and Depression; and the National Mental Health Leadership Forum. Awards include the 1989 Special Presidential Commendation from the American Psychiatric Association, the 1988 Distinguished Leadership Award from the

North Dakota Psychological Association, and the National Excellence in Leadership Award from North Dakota.

He has been recognized by *Who's Who in American Politics*, *Who's Who in North Dakota*, *Who's Who in the Midwest*, *Personalities of America*, and *Men of Achievement*. Mr. Unhjem graduated magna cum laude with a B.A. in history and political science from Jamestown College in North Dakota in 1975. In 1978, he earned a J.D. with distinction from the University of North Dakota School of Law in Grand Forks. He is married and has three children.

Helen Wilshire Walsh

Helen Walsh of Greenwich, Connecticut, is a Board Member of the Rehabilitation Institute of Chicago, one of the largest rehabilitation facilities in the world. She has been involved in disability advocacy for many years and has been associated with the Institute of Rehabilitation Medicine at the New York Medical Center, where she served as Associate Trustee. She has served as Vice President, President, and Chairman of the Board of Rehabilitation International, USA.

Ms. Walsh has been a Member of the President's Committee on Employment of People With Disabilities, and was appointed by the President to serve as a Member of the National Advisory Council of Vocational Rehabilitation. In 1976, Ms. Walsh received the Henry J. Kessler Award for outstanding service in the rehabilitation field. She has received the Rehabilitation International Award for Women and the Anwar Sadat Award for outstanding work in the field of rehabilitation.

NATIONAL COUNCIL STAFF

Edward P. Burke

Edward P. Burke currently serves as the Acting Executive Director of the National Council on Disability. Prior to joining the Council, Mr. Burke served as Special Assistant to the Commissioner at the U.S. Administration on Developmental Disabilities, where he worked closely with the Commissioner and senior staff in the management of an annual budget in excess of \$105 million supporting a nationwide network of over 160

programs (Developmental Disabilities Councils, Protection and Advocacy Systems, University Affiliated Programs, and Projects of National Significance).

Mr. Burke has also served as the Executive Director of the New Hampshire Developmental Disabilities Council and Executive Director of Autism Services Association in Massachusetts. He has extensive experience in direct work with people with severe disabilities and family members, particularly concerning issues such as family support, individual support and advocacy, special education in mainstream neighborhood schools, responsible deinstitutionalization programming, and expert court opinion.

Mr. Burke holds several degrees and certifications in the areas of special and regular education and was awarded one of two Winston Churchill Fellowships granted to U.S. citizens in 1979. He has considerable experience in serving as a consultant and trainer to major governmental and private sector agencies in this country and abroad around the planning, implementation, and evaluation of programs designed to increase the independence and community integration of people with disabilities, and has published and edited numerous articles and papers on both the clinical and policy aspects of serving people with disabilities.

Billie Jean Hill

Billie Jean Hill joined the staff of the National Council on Disability as Program Specialist in March 1992. Previously, Ms. Hill was Director of Communications and Editor for the Blinded Veterans Association and earlier served as founding Director of a statewide broadcast service for persons with reading disabilities with Mississippi Educational Television in her home state. She was appointed to work on a governor's commission in Mississippi to report on the needs of children and youth in rural Mississippi who are disabled. Ms. Hill studied journalism and education at Mississippi University for Women and at the University of London in England. She serves as Chairperson of the Board of Publications for the American Council of the Blind.

Mark S. Quigley

Mark Quigley joined the staff as a Public Affairs Specialist in May 1990. He previously served as a consultant to the U.S. National Commission on Drug-Free Schools. He is a former program coordinator at the U.S. Interagency Council on the Homeless and

former Director of Communications at the White House Conference on Small Business. Mr. Quigley graduated *magna cum laude* in 1979 from Northern Virginia Community College in Annandale, Virginia, with an A.A. in general studies. He received a B.A. in government and politics in 1983, and an M.P.A. in public administration in 1990 from George Mason University in Fairfax, Virginia.

Brenda Bratton

Brenda Bratton, Executive Secretary for the National Council, was formerly employed as a secretary at the National Transportation Safety Board. Ms. Bratton graduated from Farmville Central High School and the Washington School for Secretaries.

Stacey S. Brown

Stacey Brown is Staff Assistant and has been employed by the National Council since 1986. Prior experience includes employment as a receptionist and clerk with the Board for International Broadcasting and with the Compliance and Enforcement Unit of the Architectural and Transportation Barriers Compliance Board, where he was a student assistant. Mr. Brown is a graduate of Howard University in Washington, D.C., where he earned a B.A. in political science in 1987.

Janice Mack

Janice Mack, who serves as the Administrative Officer for the National Council, was formerly employed with the National Oceanic and Atmospheric Administration. Ms. Mack graduated from Calvin Coolidge High School.

APPENDIX B

**NATIONAL COUNCIL ON DISABILITY
PUBLICATIONS LIST**

Furthering the Goals of the Americans with Disabilities Act Through Disability Policy Research in the 1990s: Summary of Proceedings; 1993

ADA Watch — Year One: A Report to the President and the Congress on Progress in Implementing the Americans with Disabilities Act; 1993

Meeting the Unique Needs of Minorities with Disabilities: A Report to the President and the Congress; 1993

Serving the Nation's Students with Disabilities: Progress and Prospects. A Report to the President and the Congress; 1993

Sharing the Risk and Ensuring Independence: A Disability Perspective on Access to Health Insurance and Health-Related Services. A Report to the President and the Congress; 1993

Study on the Financing Assistive Technology Devices and Services for Individuals with Disabilities: A Report to the President and the Congress; 1993

Wilderness Accessibility for People with Disabilities: A Report to the President and the Congress of the United States on Section 507(a) of the Americans with Disabilities Act; 1992

The Impact of Exemplary Technology-Support Programs on Students With Disabilities; 1991

The Education of Students with Disabilities: Where Do We Stand? A Report to the President and the Congress of the United States; 1989

On the Threshold of Independence: A Report to the President and to the Congress of the United States; 1988

Toward Independence: An Assessment of Federal Laws and Programs Affecting Persons with Disabilities — With Legislative Recommendations; 1986



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